



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application  
No. 09/803,234

For: Method and Apparatus for  
Tracking Signals in a Wireless  
Communication System

Inventor: Bender et al.

Examiner: Ghebretinsae, Temesghen

Filed: 03/08/2001

) Art Unit No. 2637

RESPONSE TO OFFICE ACTION

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Commissioner:

In response to the Office Action dated 12/3/2004 please amend the above-identified application as indicated below.

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8(a))

I hereby certify that this correspondence is, on the date shown below, being:

**MAILING**

- ☒ deposited with the United States Postal Service with sufficient postage as first class mail, in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Depositor's Name: Carola Emelius-Swartz  
(type or print name)

Date: 2/24/2005

Signature: 

**FACSIMILE**

- ☐ transmitted by facsimile to the Patent and Trademark Office.

Depositor's Name: \_\_\_\_\_  
(type or print name)

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

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05/03/2005 EDAVIS 00000015 170026 -- 09003234  
01 FC:1201 400.00 DA

Attorney Docket No.: 000421  
Customer No.: 23696



2637  
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AMENDMENT TRANSMITTAL FORM

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Customer No.: 23696  
Attorney Docket No.: 000421  
In Re Application of: BENDER et al.  
Serial Number: 09/803,234  
Filed: 3/8/2001  
Examiner: T. GHEBRETINSAE  
Group Art Unit: 2637

Dear Sir:

Transmitted herewith for filing is a Response to Office Action in the above identified application.

CLAIMS	(a) Number Remaining After Amendment	(b) Highest Number Previously Paid For	(c) Extra Claims	Large Entity Fee	Fee Paid	
Total*	20	20	0	x \$50 =	\$0.00	
Independent**	4	4	0	x \$200 =	\$0.00	
Multiple Dependent Claim(s): <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				\$360	\$0.00	
EXTENSION FEES				<input type="checkbox"/> One Month	\$120	\$0.00
				<input type="checkbox"/> Two Months	\$450	\$0.00
				<input type="checkbox"/> Three Months	\$1020	\$0.00
TERMINAL DISCLAIMER				\$130	\$0.00	
				TOTAL FEE	\$0.00	

\*If the number in column a is less than 20, enter 0 in column c.

\*\*If the number in column a is less than 3, enter 0 in column c.

4. ☐ Fee check in the amount of \$\_\_\_\_\_ is enclosed to pay for any claim and/or extension fees.
5. ☒ Please charge Deposit Account No. 17-0026 of QUALCOMM Incorporated the amount of \$0.00.  
The Commissioner is hereby authorized to charge payment of any additional fees that may be required, or credit any overpayment to said Deposit Account No. 17-0026. A duplicate of this sheet is enclosed for fee processing.
6. ☒ The Commissioner is further hereby authorized to charge to said Deposit Account No. 17-0026, pursuant to 37 CFR 1.25(b), any fee whatsoever which may become properly due or payable, as set forth in 37 CFR 1.16 to 37 CFR 1.18 inclusive, for the entire pendency of this application without specific additional authorization.

Date: 2/24/2005

Signature:

Larry J. Moskowitz, Reg. No. 42,961  
Tel. No. 858-651-4556

QUALCOMM Incorporated  
Attn: Patent Department  
5775 Morehouse Drive  
San Diego, California 92121-1714  
Telephone: (858) 658-5787  
Facsimile: (858) 658-2502

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